ENVIRONMENTAL IMPACT OF MEDICAL SERVICES AND POPULATION HEALTH IN NAMANGAN CITY AREAS

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ANNOTATION

In this article, the impact of medical services in the area of Namangan city and the impact of city development on the environment is studied. Issues of reducing the impact on the health of the population through the development of the green economy of cities are covered.

Keywords City, medical services, public health, environment, disease, ecology, tourism, medical ecology.

Nowadays, during the global development of time, the spread of diseases and the increasing impact of diseases on human health are becoming urgent problems of today. The increasing development of Uzbekistan's urban infrastructure, the tourism sector, the increasing proximity of the population to the cities accelerates the spread of diseases of the urban population, the increasing occurrence of diseases in the urban areas due to the development of tourism leads to the deterioration of the medical condition of the city. This, in turn, makes it necessary to develop scientific and practical proposals to improve the level of health of city residents [2:65 p.]

The tightening of the relationship between nature and society shows that it is necessary to study ecology in a broader way, because human intervention in nature has negative consequences. In this way, by studying the impact of ecology on human health, certain areas of disease are highlighted and their nosocards are being developed. But due to the fact that such researches are less, the shortcomings of this field are clearly noticeable. For example, it is seen that the in-depth examination of factories has a negative effect on the health of the population. In 1991, 75,000 doctors worked in the field of providing medical services to the population, and by 2018, their number will be 84,100 (a 12% increase). The number of secondary medical workers increased by 41% (341.3 thousand people) compared to 1991. According to Table 1, the number of doctors per 10,000 inhabitants decreased from 35.5 (1991) to 26.2 (2016), and the number of secondary medical workers decreased from 114.7 to 106.3, respectively. 34 percent of the available doctors are top-class doctors, their qualitative development is shown in Figure 9. It is also observed in the pictures that the share of doctors with less than 5 years of experience is decreasing.[7:19 p.]

(1997-2022 Years)

Years	Total number of doctors (thousands)	Number of doctors per 10,000 population	Total number of secondary medical	Number of secondary medical personnel per
			workers (thousands)	10,000 population
1997 y.	75,0	35,5	242,2	114,7
2002 y.	76,2	33,2	249,6	108,9
2007 y.	81,5	32,8	259,7	104,7
2012 y.	76,5	29,1	271,0	103,0
2017 y.	79,9	27,4	310,2	106,5
2022 y.	90,1	29,2	381,3	110.3

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For example, in the city of Namangan, there will be a kind of sick people. Another one of them is the waste of chemical plants and petrochemical plants, and nature has a bad effect on human health, causing all kinds of infectious and airborne diseases. ecology of human diseases) can be distinguished. He studies the factors and laws of population diseases in connection with the natural and social environment. Ecology is very close to geography in terms of its content. Therefore, it is appropriate to recognize nosoecology as a separate direction of nosogeography. [5:39 p.]

In the first case, it is assumed that the diseases of the population are related to environmental conditions, and in the second - the spread of one or another disease in a specific area and its connection with the natural and socio-geographical characteristics of this place.

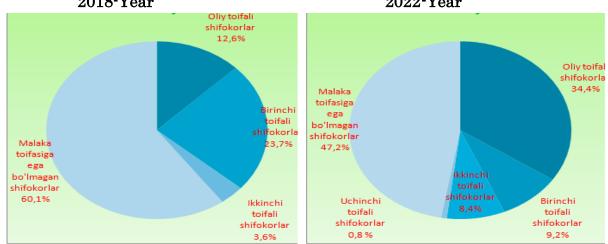
The concept of ecology of diseases was first used as a term by the American researcher Jacques May (a Frenchman, a US citizen, who worked as a military doctor in Vietnam) in the middle of the last century. He is the author of a number of important works in this field, including "The Ecology of Human Diseases" (New York, 1958) and "The Study of Human Diseases" (New York, 1961). The ideas that appeared in the study of zooanthroponoses by Jacques May, in turn, led to the study of other groups of diseases. Nozoecology is an empirical, specific aspect of ecology, which at the same time emphasizes its geographical aspect, i.e. regional distribution and differences of diseases in different regions under the influence of the local natural and social environment.

In 2018, during the analysis of the incidence of some infectious and parasitic diseases of the population, diseases such as gout, measles, rubella, and malaria were not recorded. In addition, it is necessary to emphasize that the share of small enterprises and micro-firms in the field of health care has increased significantly in recent years.

A graph comparing the data of 2020 with 2016 by qualification categories of doctors.

2018-Year

2022-Year



Information was used from the Ozstats.uz site.

As an example, in 2018, the share of small enterprises and micro-enterprises in the number of inpatient facilities was 40.4% instead of 37.9% in 2022, and their share in outpatient clinics was 39% instead of 35.9% in 2022. The number of hospital beds in small enterprises and micro-enterprises increased by 1.7 thousand, and in 2015, 2.8 percent of all patients treated, and in 2016, 205.1 thousand patients, i.e. 3.7 percent, were treated in small enterprises and micro-

enterprises. In order to analyze the medical-geographical situation, the second direction called "methodology and methodology of geographical and non-ecological research" used various ecological-hygiene and epidemiology methods, as well as zoning, mapping and mathematical modeling methods. [1:27 p.] From the point of view of geography, medical geographical, or more precisely, nosogeographical zoning is important. [3:22 p.] It is possible to carry out integrated medical-geographical zoning by specific groups of diseases related to the identification of some nosogeographic foci and areas. According to N.Q. Komilova (2012), population density and location system have a great influence on the spread of many infectious-parasitic diseases from the point of view of medical geography. [6:26 p.]

At the same time, it should be noted that not only the location of the population, but also other factors, including the social living conditions of the population, its provision of housing, proper nutrition, customs, lifestyle, etc., also contribute to the spread of diseases. has an effect. Cartographic method is very important in geographical research. Mapping is a method of comprehensive assessment and reflection of the natural and socio-economic conditions of a specific area. In this regard, the classification proposed by A.A.Shoshin (1962) is quite useful.

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